

**STATE CRIME VICTIMS' ASSISTANCE FUND
FOR CHILD ABUSE AND NEGLECT
GRANT APPLICATION KIT**

**INSTRUCTIONS FOR FILING AN APPLICATION FOR FUNDING
UNDER THE CRIME VICTIMS' ASSISTANCE ACT OF 1989**

**OFFICE OF ATTORNEY GENERAL PHILL KLINE
120 SW 10TH Avenue, 2ND FLOOR
TOPEKA, KANSAS 66612-1597
(785) 291-3690
(800) 828-9745**

**SIX APPLICATIONS (ONE ORIGINAL AND FIVE COPIES)
TO BE FORWARDED TO THE OFFICE OF THE ATTORNEY GENERAL BY**

MARCH 15, 2006

APPLICATIONS NOT POSTMARKED BY THIS DATE WILL NOT BE ACCEPTED

**PLEASE DO NOT CALL CONCERNING THE STATUS OF YOUR APPLICATION.
YOU WILL BE NOTIFIED IN WRITING.**

GUIDELINES

STATE CRIME VICTIMS' ASSISTANCE FUND FOR CHILD ABUSE AND NEGLECT POLICY GUIDELINES

The following information defines eligibility and accountability criteria and sets forth requirements for application and administration of grants awarded from the State Crime Victims' Assistance Fund for the purpose of programs aimed, as their primary function, at preventing child abuse and neglect or providing residential services or facilities to victims of child abuse or neglect.

STATE CRIME VICTIMS' ASSISTANCE FUND FOR CHILD ABUSE AND NEGLECT SOURCE OF INCOME

The money to be distributed for this purpose is generated from \$.50 on county court docket fees and \$.50 from municipal court docket fees.

CRITERIA

The purpose of this grant program is to provide funds for ongoing operating expenses of programs including court-appointed special advocate programs providing:

- 1) temporary emergency shelter for victims of child abuse and neglect;
- 2) counseling and assistance to those child victims; or
- 3) educational services directed at reducing the incidence of child abuse and neglect and diminishing its impact on the child victim.

ELIGIBILITY

Available funds may be awarded to eligible applicants who meet the following requirements: (1) meet the requirements of section 501(c) of the internal revenue code of 1986; (2) duly registered and in good standing with the Office of the Secretary of State as a not for profit corporation; (3) meet normally accepted standards for not for profit organizations; (4) have trustees or board of directors who represent the racial, ethnic, and socioeconomic diversity of the county or counties served; (5) have received 50 percent or more of their funds from sources other than funds distributed through this fund (other sources may be public or private and may include contributions of goods or services, including materials, commodities, transportation, office space or other types of facilities or personal services;) (6) demonstrate ability to successfully administer programs that meet the criteria defined above; (7) make available an independent certified audit of the previous year's financial records; (8) have obtained appropriate licensing or certification, or both; (9) serve a significant number of residents of the county or counties served; and (10) does not unnecessarily duplicate services already adequately provided to county residents (K.S.A. 2001 Supp. 74-7334(d)).

APPLICATION DEADLINE

Each grant proposal shall be submitted to the Attorney General's Office **postmarked no later than March 15, 2006.**

AVAILABLE FUNDS

Each eligible applicant must receive 50 percent or more of their agency budget from sources other than funds distributed through this fund. Other sources may be public or private and may include contributions of goods or services, including materials, commodities, transportation, office space, or other types of facilities or personal services. No maximum or minimum dollar amounts have been established for individual grant awards.

LIMITATIONS OF FUND USE

- (a) These grant funds shall not supplant other state or local funds that would otherwise be available for child victims' assistance projects.
- (b) Equipment and hardware are unallowable unless necessary and essential to the child abuse and neglect grant project's success.
- (c) .General salaries and personnel costs are unallowable unless necessary and essential to the child abuse and neglect grant project's success.
- (d) Construction or land acquisition are unallowable costs.
- (e) The use of child abuse and neglect grant project funds is prohibited for child abuse and neglect grant projects which offer a low probability of improving services to child victims as determined by fiscal and program audits.
- (f) Administrative/indirect costs. The use of child abuse and neglect grant project funds to pay for costs incurred in applying for, administering or auditing the grant is not allowed. Similarly, indirect costs are not allowed.
- (g) **Because of limited funding, items pertaining to the area of magazine subscriptions, membership dues, etc., will not be allowed. Similarly, funds for training outside the state of Kansas will not be allowed, unless necessary and essential to the grant project's success.**

GRANT PROJECT PERIOD

Each grant project funded under this grant fund shall be for a period of 12 months from July 1 to June 30. Any funds not expended by June 30, 2007, must be returned to the Office of the Attorney General.

REPORTING REQUIREMENTS

The following reports are required if funding under the State Crime Victims' Assistance Fund For Child Abuse and Neglect is received:

- (a) The quarterly expenditure report, Financial Status Report Form, provides fiscal information on expenditures during a three-month period and is due 15 days after the end of each quarter.
- (b) The semi-annual Grant Project Narrative Report provides a narrative description of the activities during the reporting period and is due 15 days after the end of the grant project period.
- (c) Grant project monitoring and on-site visits will be conducted by the Attorney General's staff.

Copies of financial and programmatic records must be maintained at the local level for a period of **five years** past the close of the grant project period.

GRANT REVIEW COMMITTEE

A committee, appointed by the Attorney General, may assist the Attorney General in determining grant awards from the State Crime Victims' Assistance Fund for Child Abuse and Neglect. The grant review committee shall be chaired by the Attorney General or his designee.

REVIEW OF APPLICATIONS

Each grant application will be evaluated using the following criteria:

- (a) The degree to which the proposal focuses on the problems and needs of child victims;
- (b) The quality of the needs assessment and documentation in terms of proposed services for child victims;
- (c) The record of successful implementation of services to child victims through this or similar programs;
- (d) Documentation and understanding of a problem as it relates to child abuse and neglect in the applicant's community;
- (e) Demonstration of clear, measurable and appropriate proposed grant project objectives, consistent with the evaluation criteria outlined in the grant application instructions;
- (f) The efficacy of evaluative components, both programmatic and fiscal;
- (g) The degree of community support and collaboration for the program;
- (h) Receipt of other state and local assistance; and
- (i) Relevant budget information.

NOTE: If the applicant is applying for another year of funding, the committee will take into account the applicant's ability in finding additional funding for the child abuse and neglect grant project, meeting the goals and objectives of the grant, submitting reporting requirements in a

timely manner, and any additional information the committee feels is necessary in considering additional funding.

Each applicant shall be notified in writing of the grant award decision.

INSTRUCTIONS

ATTENTION

Please read the following before completing and submitting the STATE CRIME VICTIMS' ASSISTANCE FUND FOR CHILD ABUSE AND NEGLECT grant application.

Submit the application and the attached forms typed or word processed in Times New Roman 12 point font size.

Applications submitted under the State Crime Victims' Assistance Fund for Child Abuse and Neglect grant program will receive a preliminary review upon receipt by the Attorney General's Office.

Due to the competitive nature of the grant award process, applications that are incomplete or not submitted correctly will be returned to the applicant and will not be considered for a grant award by the Attorney General's Grant Review Committee.

If the application is returned to the applicant as incomplete prior to the postmark deadline, the applicant may choose to resubmit a complete application. However, NO resubmissions are allowed after the postmark deadline.

An incomplete application means the following:

- ▶ Application is missing information;
- ▶ Incorrect forms were used;
- ▶ Application is not in the correct order; or
- ▶ Submitting less than the correct number of copies.

*** * * GENERAL INSTRUCTIONS * * ***

Submit the application narrative in Times New Roman 12 point font or larger. Use the attached forms where applicable. Keep the information as brief as possible and explanatory statements clear and concise. Staple applications in the upper left-hand corner and number all pages in the bottom right-hand corner. The first two pages have been numbered. **Do not submit any items not specified in the Summary of Contents (i.e. pictures, news articles, letters of support), other than those requested. Do not include covers, appendices, fancy bindings, artwork, brochures, etc.** These items will be removed prior to review.

#1

GENERAL INFORMATION FORM

Directions: See attachment.

#2

SUMMARY OF CONTENTS FORM

Directions: See attachment.

#3

PRIOR ACCOMPLISHMENTS

Directions: Please share specific agency accomplishments over the previous 12-month period. Include the number of child victims served and/or children educated by the agency. Describe any evaluations conducted and explain the results. If currently receiving CVAF-CA funds, report the number of child victims served and/or educated by the grant project, specifying what reporting period the numbers represent. Describe evidence of the success of the grant project, including progress made toward achieving grant project goal(s) and objectives. All applicants must complete this section, whether CVAF-CA funds were received in FY 2006 or not.

**** Please note, sections 4, 5, 6 and 7 are related. The general goal(s) and measurable objectives of the proposed grant project should be directly related to the results of the needs assessment. The grant project's evaluation plan should be used to demonstrate progress made toward achieving the proposed goal(s) and objectives.**

#4

PROBLEM STATEMENT AND NEEDS ASSESSMENT

Directions: The submission of an application presumes there is a definable problem which will be solved either in whole or in part with the grant project for which grant funds are being requested. As other agencies are competing for limited resources, please document as extensively and factually as possible the definition of the problem in the applicant's service area and its severity. The responsibility in this section is to clearly and concisely define the problem using facts and

statistics which support the contention that there is, in fact, a serious problem in the community which grant funds can help solve. Please include the needs assessment which was used to develop the problem statement, such as agency service activity, law enforcement reports, number of 911 calls, assessing the community, input from clients or beneficiaries of the applicant, etc. Include objective data from existing data sources. If the applicant is comparing local data to state or national data, information should be included either to establish the need locally or describe why the local community is limited in resources to address the problem, etc. **Please cite the resources used to obtain the data submitted establishing a need for grant funds and include the number of victims the applicant projects to serve with these grant funds. If the request for funds has increased from the previous year's request, be sure to explain the need for additional funds and explain what additional services will be provided.**

#5

PROPOSED GRANT PROJECT GOAL(S)

Directions: State the goal(s) of the proposed grant project for which the applicant is requesting funds. This should not be the goal(s) of the agency as a whole. However, the goal(s) for the grant project should be consistent with the mission and overall goals of the agency, as well as the results of the needs assessment.

#6

PROPOSED GRANT PROJECT OBJECTIVES

Directions: List the objectives to be accomplished in order to reach each goal listed. Objectives should be expressed in terms of alleviating the problem identified through the needs assessment and of reaching the proposed grant project goal(s). Objectives should be specific, measurable, realistic and consistent with the goals of the grant project, and cover a single event or outcome. Include the activities used to meet each objective and a timetable to complete each activity.

Follow the format below when writing the grant project goal(s) and objectives. An example of outcome (impact) objectives and process (activity) are included.

Example:

Goal I: Teen drug involvement in Springfield will decrease.

Objective	Activities	Person Responsible	Time Frame
1. Three drug elimination specialists will be hired. (Process)	1. Job notices will be posted. Interviews will be conducted.	1. Program Director	1. July 1, 2006 - August 1, 2006
2. Drug use among junior high students will decrease by 5% as measured by 2003 KCC survey results. (Outcome)	2. Drug curriculum will be implemented. Classes will participate 2 times a week.	2. Drug elimination specialists	2. August 1, 2006 - June 30, 2007
3. The junior high students will participate in the peer mediation program. (Process)	3. (a) Students will vote for peer mediators. (b) Mediation program will meet once a week.	3. Drug elimination specialists Drug elimination specialists and peer mediators	3. (a) By September 30, 2006 (b) October 1, 2006 - June 30, 2007; Progress will be monitored monthly.

#7 PROPOSED GRANT PROJECT MONITORING AND EVALUATION

Directions: Describe the procedure for monitoring the proposed grant project. Who will track the proposed grant project throughout the grant project period, what data will be collected, and how will the information that is monitored be used to encourage success of the proposed grant project? Describe the criteria that will be used to evaluate the effectiveness and quality of services provided through the proposed grant project. The evaluation should be designed to provide an objective assessment of the effectiveness or input of the proposed grant project. Specify the procedures to be used and how the information/data collected will be used to improve the proposed grant project. At a minimum, explain how the proposed objectives will be measured and how it will be determined whether the grant project is effectively and efficiently reaching the proposed goal(s) and objectives.

#8 PROPOSED GRANT PROJECT STAFFING PATTERN

Directions: Describe the staffing pattern that will meet the proposed project goal(s), objectives, and evaluation. Include all persons responsible for achieving proposed objectives as well as the supervisors of those individuals. Also include staff responsible for monitoring and evaluating

the proposed grant project's progress.

#9 PROPOSED GRANT PROJECT COORDINATION

Directions: State how the proposed grant project will coordinate with existing services and resources for the population to be served. What community outreach strategies will the proposed grant project employ? How will the proposed grant project cooperate with other agencies, for example: law enforcement, mental health centers, schools, regional prevention centers, prosecuting attorneys' offices, linkages with governmental or private agencies, etc.? Please list the name of the contact person for each agency the proposed grant project will coordinate with in providing services or making referrals.

#10 UNDERSERVED POPULATIONS

Directions: Define the underserved population identified in the applicant's community. Provide the applicant's plan to reach and provide services to the underserved populations including those underserved because of ethnic, racial, or cultural background; language diversity; differently-abled; or geographic isolation, etc.

#11 DISSEMINATION OF CRIME VICTIMS' RIGHTS INFORMATION

Directions: Describe the applicant's written procedures for assisting child victims in seeking available crime victims' compensation benefits and informing child victims of their rights as provided by law. The procedures must detail how victims will be informed of the statutory rights of victims stated in K.S.A. 74-7301, 74-7333, 74-7335.

#12 STATEMENT OF NON-DUPPLICATION OF PROPOSED GRANT PROJECT

Directions: The applicant should describe that the proposed grant project is not already adequately provided to child residents in the community.

#13 CIVIL RIGHTS CONTACT INFORMATION

Directions: Applicants must include the name, address, and telephone number of a civil rights contact person who has lead responsibility in ensuring that all applicable civil rights requirements are met, and who acts as liaison in civil rights matters.

#14 MAKE-UP OF TRUSTEES OR BOARD OF DIRECTORS

Directions: Provide the make-up of agency Trustees or Board of Directors who represent the

racial, ethnic, and socioeconomic diversity of the county or counties served. State demographic percentages clearly and compare with county populations.

#15

BUDGET SUMMARY FORM

Directions: Complete the attached Budget Summary Form as accurately as possible. All amounts should be rounded off to the nearest whole dollar. The request should be reasonable to reach the proposed goal(s) and objectives: When listing Personnel positions, **circle after each position whether it is a new position (N) or an existing position (E) to the agency. Each position has only one title.** Use only the official title on the Budget Summary Form and in the Budget Narrative. Please state any new job duties or functions in the Budget Narrative.

#16

BUDGET NARRATIVE

Directions: Describe in detail each item listed in the Budget Summary Form. Please state any new job duties or functions of personnel listed. **Show all calculations used to arrive at each line item request.** For example, for items such as personnel, show the annual salary rate and the percentage of time devoted to each personnel position to be paid for with these funds. For fringe benefits, show the specific rate being applied, etc. All amounts should be rounded off to the nearest whole dollar. If the position is not for the 12 month grant period, prorate the salaries and fringe benefits to reflect the same time frame used in the goals(s) and objectives.

Follow the format below when writing each budget category in the budget narrative. An example is provided.

Example:

Name/Position or Item with Description	Purpose	Location, if applicable	Computation	Request
Personnel: Drug Elimination Specialist (N)	To implement proposed objectives		\$12.00 per hour x 1914 hours (2080 x 11/12)	\$ 22,968
Fringe Benefits: FICA			22,968 x 7.65%	\$ 1,757
Travel: * Conferences/Workshops	Drug Prevention Training	Kansas City, KS	200 miles x .33 \$95 x 2 nights lodging; meals at \$30/day x 2 days	\$ 66 190 60 \$ 316
Equipment: ** 1 ABC computer with 17"	For use by the project director	USD 123 school building	computer \$900	

monitor			monitor \$400	\$ 1,300
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***Please note that for purposes of this application and grant program, CVAF-CA grant funds will not be used to reimburse mileage expenses in excess of \$.40 per mile or the applicant's approved policy rate, whichever is lower. If the applicant chooses to reimburse at a rate in excess of this amount, per their agency policy, the applicant should be aware that no grant funds administered by the Kansas Attorney General's Office can be used to make up the difference.**

****Please note that for purposes of this application and grant program, equipment is defined as assets with a useful life of one year or more and a cost of \$100 or more.**

#17 CURRENT FISCAL YEAR AGENCY BUDGET

Directions: Submit the applicant's current fiscal year budget, including balanced income **and** expenses. If the applicant is under the umbrella of a larger entity, submit the budget developed for the applying program. Agency income should list **all** sources of financial support (i.e. foundations, government agencies, fund-raising events, individual contributions, etc.). For each income source, state the amount and its status (received, requested, committed, or projected). If the income is requested or projected, state the date the agency expects to be notified of the funding decision or the date the agency anticipates to collect the income. Be sure to include the appropriate pro-rated portion of this grant application request as budgeted income with a "requested" status. Also, be sure that all line items being requested in this application can be found in the agency's budget for expenses.

Example:

SOURCE:	AMOUNT:	STATUS:	DATE
City of Topeka	\$10,000	Projected	7/06
United Way	5,000	Received	2/06
Walk-A-Thon	500	Collected	1/06
CVAF-CA-AG	<u>20,000</u>	Requested	6/06
Total Agency Income	\$35,500		

#18 NEXT FISCAL YEAR AGENCY BUDGET

Directions: Submit the applicant's next fiscal year budget, including balanced income **and** expenses. If the applicant is under the umbrella of a larger entity, submit the budget developed for the applying program. Agency income should list **all** sources of financial support (i.e. foundations, governmental agencies, fund-raising events, individual contributions, etc.). For each income source, state the amount and its status (received, requested, committed, or projected). If the income is requested or projected, state the date the agency expects to be notified of the funding decision or the date the agency anticipates to collect the income. Be sure to include this

grant application request as budgeted income with a "requested" status. Also, be sure that all line items being requested in this application can be found in the agency's budget for expenses. Follow the same example as above.

#19

THREE LETTERS OF SUPPORT

Directions: If the applicant did not receive funds in the prior fiscal year, submit **three** current letters of support. **These letters must be from local government agencies** and they **must** accompany the grant proposal. If unable to get government support, please state reasons as to why. If the applicant received a grant from the State Crime Victims' Assistance Fund for Child Abuse and Neglect in the prior fiscal year, do not complete this section.

#20

COPIES OF LICENSING OR CERTIFICATION FOR AGENCY

Directions: If the applicant is certified or licensed to work with children who are abused or neglected, please include a copy of the license. If the applicant is an agency which provides emergency shelter for victims of child abuse or neglect, please submit a copy of the license to house children.

#21

PROOF OF 501(C) STATUS

Directions: Submit proof of the agency's exempt status as determined by the Internal Revenue Service.

#22

SECRETARY OF STATE REGISTRATION

Directions: Submit a **current** (less than one year old) copy of the applicant's Certificate of Good Standing with the Kansas Secretary of State's Office, (785) 296-4564.

#23

CURRENT AUDIT REPORT

Directions: **Include one copy of a current audit report and provide information on local audit procedures.** Include with the audit the Auditor's Letter to Management if applicable. If there are any findings and/or recommendations stated in the audit report or in the Letter to Management, also include a written explanation stating how the findings and/or recommendations were, or will be, addressed by the applicant. **If the Attorney General's Office has previously received a copy of the most current audit report, please state so in the application and include information on what period was covered, who did the audit, and when it was done.**

ATTACHMENTS

**STATE CRIME VICTIMS' ASSISTANCE FUNDING
FOR CHILD ABUSE AND NEGLECT
FISCAL YEAR 2007**

GENERAL INFORMATION FORM

1. Proposed Grant Project Name
2. Agency Name _____
Address _____
City _____ Zip _____ County _____
Website Address _____
3. Primary Contact for Proposed Grant Project
Telephone (____) _____ Fax (____) _____
Email address _____
4. Fiscal Officer _____
Telephone (____) _____ Fax (____) _____
5. Federal Identification Number _____
6. Funding Period: FROM July 1, 2006 TO June 30, 2007
7. County(ies) in which proposed grant project will operate
8. Population (number) of area served by child abuse and neglect grant project
9. Brief description of proposed grant project _____
10. Projected number of child victims to be served and/or educated by proposed child and neglect grant project
11. Number of years agency has been in operation
12. If awarded, these funds will be used for program purpose number (refer to page 1 of Guidelines to select from 1-3 in Criteria Section)
13. If awarded, these funds will:
____ Create a new project or service activity OR
____ Enhance or expand an ongoing project or service activity not previously funded by the State CVAF-CA OR
____ Continue existing project currently funded with State CVAF-CA
14. Total Agency Budget for Current Fiscal Year
Total Agency Budget for Next Fiscal Year
15. State Crime Victims' Assistance Fund for Child Abuse and Neglect Request (Dollar Amount)

***This page should be completed last, after the rest of the application is ready to be submitted.**

SUMMARY OF CONTENTS

Before beginning any work on your proposal, read the guidelines thoroughly. As you complete the grant application, please use this check-list as a guide. Complete and sign this page, and turn it in with the application as page 2. When submitting the grant application, please put together the requested information in the following order. Please check "Yes" if the information is enclosed with the application.

	YES	NO	N/A	AG Use Only
1. General Information Form (Attached Form, pg 1)	_____	_____		
2. Summary of Contents (Attached Form, pg 2)	_____	_____		
3. Prior Accomplishments	_____	_____	_____	
4. Problem Statement and Needs Assessment	_____	_____	_____	
5. Proposed Grant Project Goal(s)	_____	_____	_____	
6. Proposed Grant Project Objectives	_____	_____	_____	
7. Proposed Grant Project Monitoring and Evaluation	_____	_____	_____	
8. Proposed Grant Project Staffing Pattern	_____	_____	_____	
9. Proposed Grant Project Coordination	_____	_____	_____	
10. Underserved Populations	_____	_____	_____	
11. Dissemination of Victims' Rights Information	_____	_____	_____	
12. Statement of Non-Duplication of Proposed Grant Project	_____	_____	_____	
13. Civil Rights Contact Information	_____	_____	_____	
14. Make-up of Trustees or Board of Directors	_____	_____	_____	
15. Budget Summary Form (Attached Form)	_____	_____	_____	
16. Budget Narrative	_____	_____	_____	
17. Current Fiscal Year Agency Budget	_____	_____	_____	
18. Next Fiscal Year Agency Budget	_____	_____	_____	
19. Three current letters of support from local units of government (if applicable)	_____	_____	_____	
20. Copies of Licensing or Certification for Agency	_____	_____	_____	
21. Proof of 501(c) Status	_____	_____	_____	
22. Copy of Current Certificate of Good Standing with Kansas Secretary of State, (785) 296-4564.	_____	_____	_____	
23. a) Copy of Current Audit Report	_____	_____	_____	
b) Copy of auditor's letter to management	_____	_____	_____	
c) Copy of applicant's response to auditor's letter to management	_____	_____	_____	
24. All the information is in the correct order as listed	_____	_____	_____	
25. There is one original plus five copies of the grant application and one copy of the current Audit Report	_____	_____	_____	

If the application is submitted incomplete, it will be returned immediately and will not be reviewed.

SIGNATURE OF PERSON COMPLETING APPLICATION